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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**Declaration  
Submitted  
With Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

LCB417

First Named Inventor

Robert L. Sokol

COMPLETE IF KNOWN

Application Number

10/669,391

Filing Date

September 24, 2003

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MULTI-TAP COMPRESSION CONNECTOR

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

09/24/2003

as United States Application Number or PCT International

Application Number

10/669,391

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☒ Customer Number: 32915 OR ☐ Correspondence address below**Name**

Christopher S. Clancy, Panduit Corp.

**Address**Legal Dept.  
17301 South Ridgeland Avenue**City**

Tinley Park

**State**

Illinois

**ZIP**

60477

**Country**

USA

**Telephone**

(708)532-1800

**Fax**

(708)614-8344

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name**

(first and middle [if any])

ROBERT L.

**Family Name**

or Surname

SOKOL

Inventor's  
Signature*Robert L. Sokol***Date**

12/15/03

**Residence: City**

Orland Park

**State**

Illinois

**Country**

USA

**Citizenship**

USA

**Mailing Address**

13820 South Lady Bar Avenue

**City**

Orland Park

**State**

Illinois

**ZIP**

60467

**Country**

USA

**NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name**

(first and middle [if any])

ROBERT W.

**Family Name**

or Surname

KOSSAK

Inventor's  
Signature*Robert W. Kossak***Date**

12/15/03

**Residence: City**

Lemont

**State**

Illinois

**Country**

USA

**Citizenship**

USA

**Mailing Address**

13323 Redcoat Drive West

**City**

Lemont

**State**

Illinois

**ZIP**

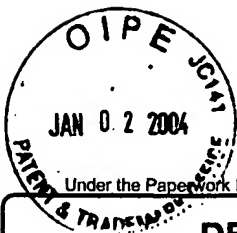
60439

**Country**

USA



Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.



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PTO/SB/02A (08-03)

Approved for use through 08/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## DECLARATION

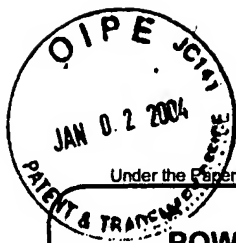
## ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 1

<b>Name of Additional Joint Inventor, if any:</b>		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
BRIAN		KELLER	
Inventor's Signature		Date	
New Lenox Residence: City	Illinois State	USA Country	USA Citizenship
2904 Levan Avenue Mailing Address			
Mailing Address			
New Lenox City	Illinois State	60451 Zip	USA Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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PTO/SB/81 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/669,391
Filing Date	September 24, 2003
First Named Inventor	Robert L. Sokol
Title	Multi-Tap Compression
Art Unit	
Examiner Name	
Attorney Docket Number	LCB417

I hereby appoint:

☒ Practitioners at Customer Number:

32915

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Panduit Corp.				
Address	Legal Department - TP12				
Address	17301 S. Ridgeland Avenue				
City	Tinley Park	State	IL	Zip	60477
Country	USA				
Telephone	(708) 532-1800	Fax	(708) 614-8344		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

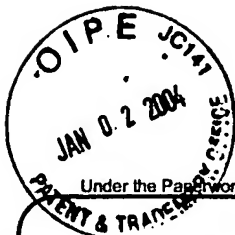
Name	Robert L. Sokol		
Signature	<i>Robert L. Sokol</i>		
Date	12/15/03	Telephone	(708) 532-1800

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application Number	10/669,391
Filing Date	September 24, 2003
First Named Inventor	Robert L. Sokol
Title	Multi-Tap Compression
Art Unit	
Examiner Name	
Attorney Docket Number	LCB417

I hereby appoint:

☒ Practitioners at Customer Number:

32915

OR

☐ Practitioner(s) named below:

Name	Registration Number

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OR

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Robert W. Kossak		
Signature	<i>Robert W. Kossak</i>		
Date	12/15/03	Telephone	(708) 532-1800

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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